

Instructions for Using the NIH Individual Performance Plan

The Individual Performance Plan is used to record and communicate performance information. Each Plan will consist of three parts: a COVER SHEET (Page 1), containing individual employee data and signatures; the JOB ELEMENTS AND PERFORMANCE STANDARDS (Page 2) - one for each element - containing the element descriptions, performance standards, progress review notes and the final rating; and the SUMMARY PERFORMANCE RATING (Page 3), containing the rating tables and summary rating assignments. Instructions for using the form during the three stages of the performance management process are provided below:

A. PLANNING

1. A performance plan must be prepared for all employees at the beginning of the rating period, at the time of entry into a new position, or when an employee begins a detail or temporary promotion of 120 days or more.
2. The performance planning process begins with the identification of the job elements, i.e., the most important duties and responsibilities for which the employee is accountable. The job elements are designated as critical or noncritical based on their importance to the job. Each plan must have at least one critical element; noncritical elements may or may not be required depending on ICD procedures. However, each plan must have at least two elements. For SES employees, each element must be weighted according to its relative importance with the combined weight of the elements totaling 100.
3. The performance standards, used to measure accomplishments, are then developed. Each job element and associated performance standard is numbered with a separate sheet used for each element. Additional pages may be added if more space is required.
4. After the elements and standards have been developed, the cover sheet, Page 1, is completed. The cover sheet must be signed and dated by the rater and reviewer before the plan is officially established. The employee's signature acknowledges receipt of the plan only and does not necessarily signify agreement with the plan. If the employee refuses to sign the plan, the rater should note this on the plan and indicate that the employee was given a copy. The rater retains the original of the plan and the employee is given a copy.

B. REVIEW

1. Although the review of employee performance is an on-going process, at least one face-to-face progress review must be conducted during the rating period. This review should be scheduled at about the midpoint of the rating period.
2. The employee's progress should be assessed on each element and that assessment should be discussed with the employee. Assignment of a formal rating on each element is not required. The rater and the employee must sign the progress review for each element in the block provided. The employee's signature acknowledges receipt of the progress review only and does not necessarily signify agreement. If the employee refuses to sign, the rater should note this on the plan and indicate that the employee was given a copy.
3. The progress review provides an opportunity to revise the plan in accordance with changes in the employee's duties and responsibilities or changes in organizational functions, objectives or priorities. Changes to the plan must be initialed and dated by the rater and the employee and a copy given to the employee. Changes to the plan made during the last 120 days of the rating period must be approved (initialed and dated) by the reviewing official. A copy of the original plan should be retained as part of the record.

4. Where actual or potential performance deficiencies are identified, assistance should be provided in an effort to improve performance. ICD procedures for documenting less than Fully Successful performance and for providing assistance should be followed.

C. RATING

1. At the end of the rating period, the employee's performance on each element is evaluated in comparison with the standards and a final element rating is determined. Final ratings other than Fully Successful or Excellent require a narrative description of actual accomplishments or deficiencies on that element.
2. Interim ratings must be completed at the time of a position change or at the completion of a detail or temporary promotion of 120 days or more. Interim ratings must be considered in determining summary ratings at the end of the annual rating period.
3. After a final rating has been assigned on each element, the summary rating tables at the top of Page 3 are to be filled out. A summary rating is then derived using the definitions provided for each level. Deviations from the definitions provided on the summary rating page must be explained on a separate sheet.
4. The summary rating must be approved, signed, and dated by the rater and the reviewing official in the blocks provided on Page 1. For EPMS and PMRS employees, approval (signature and date) of the Budget Manager or Performance Recognition Group (PRG) Manager, respectively, is required. For SES/SSS employees, approval (signature and date) of the ICD Director and the Performance Review Board (PRB) Chair is required.
5. The summary rating must be discussed with the employee. The employee must sign and date the summary rating in the block provided on Page 1. The employee's signature acknowledges receipt of the summary rating only and does not necessarily signify agreement. If the employee refuses to sign, the rater should note this on the form and indicate that the employee was given a copy. The employee may document disagreement with the summary rating on the summary rating page or on a separate sheet attached to the plan.
6. Personnel Offices should be consulted regarding the appropriate assistance to be provided and/or administrative action to be initiated for employees receiving a final rating of less than Fully Successful on any critical element. ICD procedures for documenting less than Fully Successful performance and for providing assistance should be followed.
7. The original of the plan is to be filed according to ICD procedures. A copy of the completed plan must be provided to the employee.

National Institutes of Health
INDIVIDUAL PERFORMANCE PLAN

EMPLOYEE'S NAME		SOCIAL SECURITY NO.	
POSITION TITLE <i>(Use official title from position description)</i>		PAY PLAN/SERIES/GRADE - -	
ORGANIZATION	COVERED BY <input type="checkbox"/> EPMS (GS and WG) <input type="checkbox"/> PMRS (GM 13-15) <input type="checkbox"/> SSS <input type="checkbox"/> SES		
APPRAISAL PERIOD From _____ To _____		NUMBER OF ELEMENTS This plan consists of _____ elements.	

SIGNATURES

PLAN ESTABLISHMENT

RATER'S NAME (Typed)		RATER'S TITLE (Typed)	
RATER'S SIGNATURE		DATE	
REVIEWER'S NAME (Typed)		REVIEWER'S TITLE (Typed)	
REVIEWER'S SIGNATURE		DATE	
EMPLOYEE'S SIGNATURE <i>(Indicates that a copy of the plan was received.)</i>		DATE	

SUMMARY RATING

<input type="checkbox"/> Outstand <input type="checkbox"/> Excellent <input type="checkbox"/> Fully Successful <input type="checkbox"/> Minimally Satisfactory <input type="checkbox"/> Unacceptable/Unsatisfactory			
<input type="checkbox"/> YES <input type="checkbox"/> NO Were all critical elements rated at least Fully Successful?			
RATER'S NAME (Typed)		RATER'S TITLE (Typed)	
RATER'S SIGNATURE		DATE	
REVIEWER'S NAME (Typed)		REVIEWER'S TITLE (Typed)	
REVIEWER'S SIGNATURE		DATE	
PRG OR AWARD BUDGET MANAGER'S SIGNATURE		DATE	
EMPLOYEE'S SIGNATURE <i>(Indicates that a copy of the summary rating was received)</i>		DATE	
ICD DIRECTOR'S SIGNATURE <i>(SES/SSS only)</i>		DATE	
PRB CHAIR'S SIGNATURE <i>(SES/SSS only)</i>		DATE	

JOB ELEMENTS AND PERFORMANCE STANDARDS		Element _____ of _____
EMPLOYEE'S NAME		<input type="checkbox"/> CRITICAL <input type="checkbox"/> NONCRITICAL
ELEMENT DESCRIPTION	ELEMENT WEIGHT (for SES employees only) _____	

PERFORMANCE STANDARDS

PROGRESS REVIEW

PROGRESS REVIEW NOTES

RATER'S SIGNATURE	DATE
EMPLOYEE'S SIGNATURE (<i>Indicates that a copy of the progress review was received</i>)	DATE

FINAL RATING

☐ Outstanding
 ☐ Excellent
 ☐ Fully Successful
 ☐ Minimally Satisfactory
 ☐ Unacceptable/
 (*Unsatisfactory for
 SES/SSS employees*)

DESCRIPTION OF ACTUAL PERFORMANCE (*Required for ratings other than Fully Successful and Excellent*).

SUMMARY PERFORMANCE RATING

EMPLOYEE'S NAME

TYPE OF RATING

☐ ANNUAL RATING
OF RECORD

☐ INTERIM
RATING

FINAL RATING TABLE

Elem No.	Check if Crit	RATINGS				
		Out- standing	Excellent	Fully Success- ful	Minimally Satisfac- tory	Unaccept- able
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

NUMERICAL RATING TABLE (for SES/SSS only)

RATING (Use scale at right)	X	ELEMENT WEIGHT	=	SCORE
	X		=	
	X		=	
	X		=	
	X		=	
	X		=	
	X		=	
	X		=	
	X		=	
	X		=	
	X		=	
TOTAL SCORE				

SES/SS
SCALE

O = 5
E = 4
FS = 3
MS = 2
U = 1

SUMMARY RATING

- ☐ **OUTSTANDING** - Rated Outstanding on all or all but one critical element and no less than Excellent on any element. (SES/SSS = 461 - 500 points.)
- ☐ **EXCELLENT** - Rated at least Excellent on all or all but one critical element and no less than Fully Successful on any element. (SES/SSS = 400 - 460 points.)
- ☐ **FULLY SUCCESSFUL** - Rated at least Fully Successful on all critical elements and no less than Minimally Satisfactory on all noncritical elements. (SES/SSS = 300 - 399 points.)
- ☐ **MINIMALLY SATISFACTORY** - Rated Minimally Satisfactory on one or more critical elements or Unacceptable/Unsatisfactory on any noncritical element. (SES/SSS = 200 - 299 points.)
- ☐ **UNACCEPTABLE (UNSATISFACTORY for SES employees)** - Rated Unacceptable/Unsatisfactory on one or more critical elements regardless of ratings on other elements. (SES/SSS = 100 - 199 points.)

Exception rule: Ratings on noncritical elements may not reduce the overall summary rating by more than one rating level.